

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | T.O. | | 2/5/99 |
| O.I.P.E. CLASSIFIER | MTW | 59 | 3/10/99 |
| FORMALITY REVIEW | YC | 70017 | 3-16-99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

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If more than 150 claims or 10 actions
staple additional sheet here

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Index of Claims



Application No.

09/256,265

Examiner

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Applicant(s)

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Art Unit

2815

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